

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5713 OF 8746

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DNC Services Corp./Dem. Nat'l Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Nichols, Pamela, , ,

Mailing Address 1031 XENOPHON ST.

City
GoldenState
COZip Code
80401-4218FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Jeffco SchoolsOccupation (for Individual)
bus driver

Receipt For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 29 / 2018

Transaction ID : C36293574A

Amount of Each Receipt this Period

25.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Actblue

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703007.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 30 / 2018

Transaction ID : C36293574AB

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ford, Susan, , ,

Mailing Address 226 Diablo Ave

City
DavisState
CAZip Code
95616-0432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information RequestedOccupation (for Individual)
Information Requested

Receipt For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2018

Transaction ID : C36261374A

Amount of Each Receipt this Period

15.00

☐ Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶

40.00

TOTAL This Period (last page this line number only).....▶